

Patient Satisfaction 1 - Facility

Based on Home Health Care - HHCAHPS

Provider Name

MAYO CLINIC HEALTH SYSTEM - ALBERT LEA

RECOVER HEALTH OF WISCONSIN INC

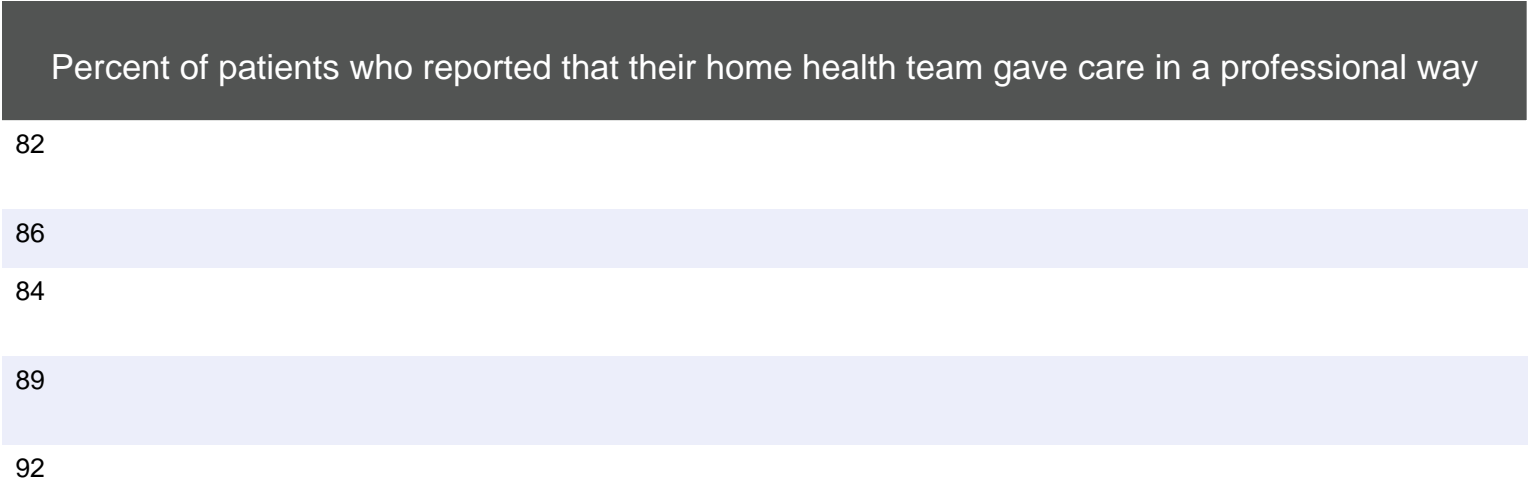
MAYO CLINIC HEALTH SYSTEM - HOME HEALTH &
HOSPICE

MAYO CLINIC HS FRANCISCAN HOME CARE

RESCARE HOME CARE WISCONSIN, INC

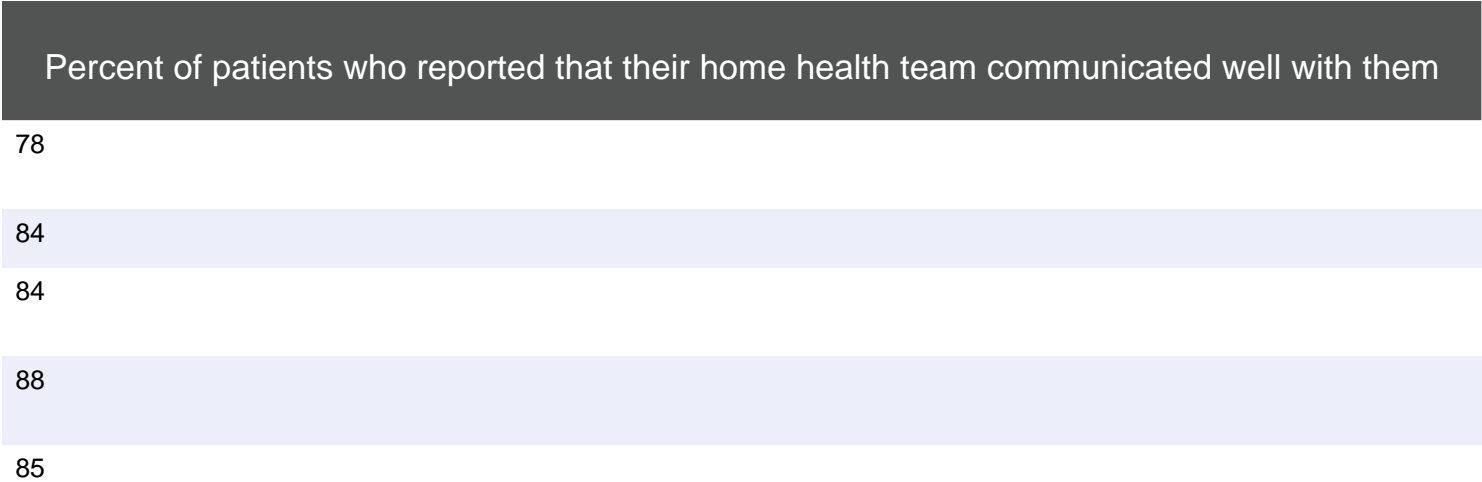
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Percent of patients who reported that their home health team discussed medicines, pain, and home safety with them

86

81

82

87

80

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Percent of patients who gave their home health agency a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)

83

82

71

84

89

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Percent of patients who reported YES, they would definitely recommend the home health agency to friends and family

70

67

77

76

76

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Number of completed Surveys	Response rate	State	CMS Certification Number (CCN)*
85	36	MN	247164
100	33	WI	527135
147	37	WI	527138
65	38	WI	527156
37	40	WI	527281







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Address	City	Zip	Phone	Type of Ownership
1705 SOUTHEAST BROADWAY	ALBERT LEA	56007	5073776393	Hospital Based Program
414 BROADWAY SUITE 201	BARABOO	53913	6083567570	Local
4033 123RD STREET	CHIPPEWA FALLS	54729	7158310100	Official Health Agency
212 S 11TH ST	LA CROSSE	54601	6083929790	Hospital Based Program
1425-B STATE HWY 16	LA CROSSE	54601	6087790900	Official Health Agency

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Offers Nursing Care Services	Offers Physical Therapy Services
	
	
	
	
	

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Offers Occupational Therapy Services	Offers Speech Pathology Services
	
	
	
	
	

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Offers Medical Social Services	Offers Home Health Aide Services
	
	
	
	
	

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Date Certified

1984-07-26 00:00:00

1984-08-29 00:00:00

1984-11-20 00:00:00

1985-06-06 00:00:00

2003-03-18 00:00:00

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Footnote for percent of patients who reported that their home health team gave care in a professional way

Fewer than 100 patients completed the survey. Use the scores shown, if any, with caution as the number of surveys may be too low to accurately tell how an agency is doing.

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Footnote for percent of patients who reported that their home health team communicated well with them

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Footnote for percent of patients who reported that their home health team discussed medicines, pain, and home safety with them

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Footnote for percent of patients who gave their home health agency a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)

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Footnote for number of completed surveys

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Footnote for percent of patients who reported YES, they would definitely recommend the home health agency to friends and family

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Footnote for response rate

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